_			4		8	EST AV	NLA	Þ	COP	Y				
,	PATENT APPLICATION FEE DETERMINATION RECOI Effective October 1, 2000								Application or Docket Number  OP 601338					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								LE	VIIIM	OR	OTHE	R THAN ENTITY		
TOTAL CLABAS							RA	ΤE	FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		BASH	FEE	355.00	ОЯ	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			1.5 minus 20=				XS	9=		OR	X\$18=			
IN	EPENDENT C	LABAS	9 minus 3 o		•		X4	) <del>-</del>		08	XBO=			
MA	LTIPLE DEPO	IDENT CLAIM P	RESENT				133			OR	+270=	/		
* If the difference in column 1 is less than zero, enter *0" in column 2							101	_	-	OR	TOTAL	מומ		
CLAIMS AS AMENDED - PART [] (Cotumn 1) (Cotumn 2) (Cotumn 3)									ENTITY	OR	OTHER SMALL			
AMENDAENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE XS 9=	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 27	Mixus	ه کړ	2	- 7		)=		ОЯ	X\$18=	126		
	Independent	. 7	Minus	3		= 4	X40	2		OR	X88≈	344		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								·	OR	+270=			
							ADDIT.	TAL		OR	TOTAL ADDIT, FEE			
(Column 1) (Column 2) (Column 3)														
AMENDMENT B		CLAIMS MEMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 24	Minus	7	7	-0	XS	-		OR	X\$18=			
	Independent	• 6	Minus	SEMICAL	7	· +	X40			OR	X80≈			
	FIRST PRESENTATION OF MULTIPLE DEPEND			ENDEN	COAIR	لــــــــــــــــــــــــــــــــــــــ	+135	1		OR	+270=			
							ADOIT,	YAL FEE		ОЯ	YOYAL	<b>A</b>		
Z	8-05	(Column 1)		(Colum	nr 2)	(Column 3)								
NT C		CLAIMS REMAINING AFTER AMENDMENT	6)	PREVIO PAID I	BEA SUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

Minus

Minus

8

\* If the entry in column 1 is tess than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THOS SPACE is less than 20, enter "20.

\*\*\*If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. OR ADDIT. FEE

FORM PTO-975 (Rev. 800)

Total

Independent

OR

OR

OR

X\$ 9-

X40=

+135=

X\$18-

X80-

+270=

TOTAL